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FORM
ORG
(Rev. 5/2012)

STATE OF HAWAII
STATE ETHICS COMMISSION



**HAWAII STATE ETHICS COMMISSION
ORGANIZATION'S EXPENDITURES AND CONTRIBUTIONS REPORT**

REPORT YEAR: 2013

☐ Amended Statement

For Lobbying Reporting Period: ☒ January 1 - last day of February ☐ March 1 - April 30 ☐ May 1 - December 31

ORGANIZATION INFORMATION

Sanofi Pasteur
Organization Name

Philip H. Hosbach
Contact Person

1 Discovery Drive

Mailing Address (Number and Street or P.O. Box)

Swiftwater, PA 18370

City

State

Zip Code

(570) 957-4724

phil.hosbach@sanofipasteur.com

Telephone

Extension

Email Address

PART I. TOTAL EXPENDITURES

		Total Amount
1	Preparation & Distribution of Lobbying Materials	1 0.00
2	Media Advertising	2 0.00
3	Postage	3 0.00
4	Compensation Paid to Lobbyists (Attached Additional Sheets As Needed) <i>List the names of all lobbyists and compensation paid to lobbyists during the statement period</i>	
	Lobbyist Name	Compensation Paid
A.	Sarah Michael	A. 0.00
B.		B.
C.		C.
D.		D.
E.		E.
F.		F.
G.	Total from Additional Attached Sheet(s)	G.
	Add lines A through G	Total Compensation Paid ▶ 4 0.00
5	Fees Paid to Consultants (other than to Lobbyists)	5 0.00
6	Entertainment & Events	6 0.00
7	Receptions, Meals, Food & Beverages	7 0.00
8	Gifts	8 0.00
9	Loans	9 0.00
10	Other Disbursements	10 0.00
	Add lines 1 through 10	Total Expenditures ▶ 0.00

EXPENDITURES OF \$25 OR MORE PER PERSON PER DAY

List all expenditures incurred for the purpose of lobbying of \$25 or more per person per day during the statement period.

Name & Address	Amount or Value
n/a	0.00

☐ Check here if additional sheets are attached

AGGREGATE EXPENDITURES OF \$150 OR MORE PER PERSON

List all expenditures incurred for the purpose of lobbying in the total sum of \$150 or more per person during the statement period.

Name & Address	Amount or Value
n/a	0.00

☐ Check here if additional sheets are attached

PART II. CONTRIBUTIONS RECEIVED

List all contributions received for the purpose of lobbying in the total sum of \$25 or more per person during the statement period.

Name & Address	Amount or Value
n/a	0.00

☐ Check here if additional sheets are attached

PART III. SUBJECT AREAS OF LOBBYING

Legislative and/or administrative action in the following areas was supported or opposed during the statement period:

- | | | | |
|---|---|---|---|
| <input type="checkbox"/> Agriculture | <input type="checkbox"/> Education | <input type="checkbox"/> Human Services | <input type="checkbox"/> Science, Technology & Economic Development |
| <input type="checkbox"/> Communications & Public Utilities | <input type="checkbox"/> Government Operation & Finance | <input type="checkbox"/> Intergovernmental Relations, International Affairs | <input type="checkbox"/> Tourism & Recreation |
| <input type="checkbox"/> Consumer Protection & Commerce | <input type="checkbox"/> Hawaiian Affairs | <input type="checkbox"/> Labor & Employment | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Culture, Arts, Historic Preservation | <input type="checkbox"/> Health | <input type="checkbox"/> Planning, Land & Water Use Management | <input type="checkbox"/> Other (indicate below): |
| <input type="checkbox"/> Ecology, Energy Environmental Protection | <input type="checkbox"/> Housing | <input type="checkbox"/> Public Safety & Corrections | |

I hereby certify that the statements made above are correct and complete to the best of my knowledge

Signature of Authorized Person

Philip H. Hosbach

Print Name

Date

VP, Immunization Policy & Gov't

Title